

**The City of Rockville Wellness Program and ARBASM Services
Present...**



July 21, 2008

Dear Health Care Professionals,

The City of Rockville Community Wellness Program and ARBA Services would like to invite you to participate in the City's 3rd annual **Community Health Fair**, this year in partnership with ARBA's 1st annual **Women's Health Day Event**. Marketed as a "Women's Health Day in the Community", this event is designed to help women become aware of common health issues and the actions they can take to ensure a healthy future for themselves and their families.

The "Know Your Numbers" clearly defines our goal to increase awareness of important health screenings. To support that goal, we are seeking vendors to offer a wide variety of free screenings, health information, services, and very affordable medical assessments for diabetes, cholesterol, and osteoporosis.

The event will be held on **Saturday, September 20 from 9:00 AM – 1:00 PM** in conjunction with the weekly City of Rockville Farmer's Market in downtown Rockville. The Farmer's Market usually receives 1-2,000 visitors on a regular Saturday. We are confident in a successful event with our event advertising and "kid friendly" environment, combined with the regular attendance and captive audience at the Farmer's Market.

Women greatly influence their family's behavior, nutrition, health and wellbeing; this event will encourage them to know more about their own health while providing information about all of the local services and resources available in Rockville and the surrounding area.

All those who provide health, nutrition, stress management, weight management, fertility, medical, and physical fitness products and services are encouraged to participate. We also welcome those that provide activities and games for children to participate and help make this a fun event for all.

Thank you,

Hillary Boguski
City of Rockville Wellness Coordinator
111 Maryland Avenue
Rockville, MD 20814
(240)-314-8119
(240) 314-8659 FAX
Hboguski@rockvillemd.gov

Arlene Bond
Women's Health Day
abbond@aol.com

The City of Rockville Community Wellness Program and ARBASM
Services Presents...

Womens
Health
Day



Join us! Sign up today!

www.womenshealthday.com or www.rockvillemd.gov/residents/wellness

Scheduled for Saturday, September 20, 2008 from 9:00 AM – 1:00 PM,

the event seeks to provide information, assessments/medical tests, doctor's advice and action planning ideas.

The event is open to the public, with 1-2,000 participants expected.

Registration deadline: Friday, August 8, 2008.

Sponsor and Vendor Information:

Flag Ship Sponsors - \$1,000.00*

- Attendee mailing list
- Logo on Goodie Bags (front of bag)
- Logo included in all event publicity and printed ads
- Company signs posted during event
- Prime table/booth location under tent
- Input with Planning Committee

* Per Woman's Health Day event

Vendor Display - \$200.00

- 6-ft display table under tent
- Logo display on goodie bag (back of bag)
- Name registration on website
- Priority Location

Registration Information:

Company Name: _____ Contact Name: _____

Address: _____

Phone: _____ Email: _____

Sponsorship Package: Flag Ship Sponsors - \$1,000.00 ☐

Vendor Display - \$200.00 ☐

Credit Card Number: _____ or Check (check number): _____

Name as it appears on the card: _____

Expiration Date: _____ 3 Digit Number on card: _____

Type of card (circle one): Visa MasterCard Signature: _____

This is the first of many ARBA's Women's Health Day events planned for Montgomery County during 2008 and 2009. Please consider becoming a Flag Ship Sponsor and having a prominent position at every event. If interested, please relay questions regarding future Women's Health Day's to Arlene Bond, of ARBA, at abbond@aol.com.

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Womens
Health
Day



PROVIDER INFORMATION FORM

Due with Payment Form by Friday, August 8, 2008. Please write legibly.

CONTACT INFORMATION:

Organization Name _____

Phone No. _____ FAX _____ E-mail _____

SERVICE DESCRIPTION: Describe your booth or display – please be as specific as possible!

Screening service: _____

Activity/demonstration: _____

Awareness/information: _____

Drawing donation: _____

FACILITY NEEDS: You will be provided with one six-foot table, table covering and two chairs. If you have additional needs, please note the **number and size** below:

_____ Additional tables _____ Electrical outlets (please describe need) _____

_____ Additional chairs _____ Other (please specify) _____

STAFF: Please note all staff that will be present at the event.

Name

Title or Credentials

Please return this form as soon as possible via: e-mail at Hboguski@rockvillemd.gov, fax (attn: Hillary Boguski) at 240-314-8659, or fill-out and submit on-line at www.rockvillemd.gov/residents/wellness